| PATENT APPLICATION FEE DETERMINATION RECO | | | | | | | Application or Docket Number | | | |
|--|--|---------------------------------------|-------------------------------|---|------------------|------------|------------------------------|-----|---------------------|---------------------------|
| | PATENT | APPLICA | ATION FEE Effective Octo | DRD | 09/615663 | | | | | |
| CLAIMS AS FILED - PART 1 (Column 2) | | | | | | SMA TYI | LL ENTITY | OR | OTHER | THAN ENTITY |
| POR 16 06 | | | JMBER FILED | NUMBER | NUMBER EXTRA | | FEE | | RATE | FEE |
| BASIC FEE | | | | | | | | OR | | 790.00 |
| TOTAL CLAIMS | | | 30 minu | | . 8 | | = | OR | x\$22= | |
| INDEPENDENT CLAIMS | | | minus 4 • | | <u>ن</u> | x41= | F 14 | OR | x82= | |
| MUL | TIPLE DEPEN | DENT CLAIM | PRESENT | | | +135 | = | OR | +270= | |
| * If the difference in column 1 is less than zero, enter "O" in column 2 | | | | | | TOTA | | 1 | TOTAL | |
| 5-15-06 CLAIMS AS AMENDED - PART II OTHER THAN | | | | | | | | | | |
| 7 | 12.00 | - (Column | 1) 🦠 🥳 | (Column 2) | (Cotumn 3) | SM/ | LL ENTITY | OR. | | ENTITY |
| AMENDMENT A | | REMAINI AFTEF AMENDM | NG | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • 30 | Minus | -30 | = 0. | x\$11: | = | OB. | x\$22= | |
| | Independent | • 4 | Minus | - 4 | = 1 | x41= | | OR | x82= | |
| A | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | +135: | | OR | +270= | |
| | | | | | | TOT | AL | | TOTAL | |
| | | (Column | | (Column 2) | (Column 3) | ADDIT. FI | Ε | OR | ADDIT. FEE | on n. A.J |
| AMENDMENT B | | REMAINI AFTER AMENDMI | NG | HIGHEST : NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | HEWAIN RATE:R | CADDI- TIONAL FIFEE |
| | Total | • | Minus | ** | = | x\$11: | | OR | x\$22= | |
| | Independent | • | Minus | *** | = | x41= | : . | OR | x82= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | +135 | = | OR | +270= | |
| | | (Column | | (Column 2) | (Column 3) | ADDIT. FI | | OR | TOTAL ADDIT. FEE | ಿ ಎಕ್ಟ |
| AMENDMENTC | | CLAIM: REMAINI AFTER AMENDMI | NG | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | •• : | = | x\$11 | = 1.4 | OR | x\$22= | |
| | Independent | : | Minus | ••• | = | x41= | | OR | x82= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | +135 | = | OR | +270= | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | |